Fill in this information to identify your c	ase:
United States Bankruptcy Court for the: EASTERN DISTRICT OF TEXAS	
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name		
Write the name that government-issued identification (for ex your driver's license passport).	picture First Name ample,	First Name Middle Name
разорону.	Sorensen	
Bring your picture identification to you	Last Name r meeting	Last Name
with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names yo	ou	
have used in the la years	First Name	First Name
Include your married	Middle Name d or	Middle Name
maiden names.	Last Name	Last Name
3. Only the last 4 digi	VVV VV 7 0 0	3 _ 7 _ xxx - xx
number or federal Individual Taxpaye	OR er	OR
Identification numl		9xx - xx

Debtor 1 Greg D Sorensen		ensen	Case number (if known)		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer	·	ls. I have not used any business names or EINs.		
	Identification Number (EIN) you have used the last 8 years		Business name		
	Include trade names a	Business name nd	Business name		
	doing business as na	Business name	Business name		
		EIN	EIN		
		EIN	EIN		
5.	Where you live		If Debtor 2 lives at a different address:		
		507 Hickory			
		Number Street	Number Street		
		Marshall TX 75670			
		City State ZIP Code	City State ZIP Code		
		Harrison County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.		
		500 E Travis			
		Number Street	Number Street		
		P.O. Box	P.O. Box		
		Marshall TX 75670			
		City State ZIP Code	City State ZIP Code		
6.	Why you are choosing this district to file for	-	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)		
P	Part 2: Tell the C	ourt About Your Bankruptcy Case			
7.	The chapter of the Bankruptcy Code yo	· ·	lotice Required by 11 U.S.C. § 342(b) for Individuals Filing of page 1 and check the appropriate box.		
	are choosing to file under	Chapter 7			
		Chapter 11			
		Chapter 12			
		✓ Chapter 13			

Greg D Sorense	en <u> </u>		Case number (if knowr	¹⁾		
8. How you will pay the fee	cou pay	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.				
		eed to pay the fee in installmer	gn and attach the Application for A).			
	By I thar fee	law, a judge may, but is not requ n 150% of the official poverty lin in installments). If you choose	e that applies to your family size	do so only if your income is less		
9. Have you filed for	□ No					
bankruptcy within the last 8 years?	√ Yes	S.				
	District	Eastern District	When 07/05/2016			
	District		When	Case number		
	District		When MM / DD / YYY	Case number		
10. Are any bankruptcy	☑ No					
cases pending or being filed by a spouse who is	☐ Yes	S.				
not filing this case with you, or by a business	Debtor		Relation	nship to you		
partner, or by an	District			Case number,		
affiliate?			MM / DD / YYY	Y if known		
	Debtor		Relation	nship to you		
	District		When MM / DD / YYY	Case number,		
11. Do you rent your residence?	✓ No. ☐ Yes		ın eviction judgment against you	and do you want to stay in your		
		No. Go to line 12. Yes. Fill out Initial State and file it with this bank	ement About an Eviction Judgmerutcy petition.	ent Against You (Form 101A)		

Deb	tor 1	Greg D Sorensen			Case	number (if known) _		
Pa	art 3:	Report About Ar	ıy Bı	usine	sses You Own as a Sole Proprietor			
12.	-	u a sole proprietor full- or part-time ss?			Go to Part 4. Name and location of business			
	A!				Pic N Pay Deli			
		oroprietorship is a s you operate as an			Name of business, if any			
	individu	al, and is not a			500 E. Travis			
	•	e legal entity such as ration, partnership, or			Number Street			
					Marshall	TX	7567	0
	-	ave more than one oprietorship, use a			City	State	ZIP Co	ode
	separat	e sheet and attach it			Check the appropriate box to describe your b	ousiness:		
	to this p	etition.			Health Care Business (as defined in 11	U.S.C. § 101(27A))	211	
					☐ Single Asset Real Estate (as defined in Stockbroker (as defined in 11 U.S.C. §		3))	
					Commodity Broker (as defined in 11 U.S			
					✓ None of the above			
Bankrup		u filing under r 11 of the ptcy Code and a s <i>mall busin</i> ess	car mos	set ap st rece	filing under Chapter 11, the court must know was propriate deadlines. If you indicate that you and the balance sheet, statement of operations, cas if these documents do not exist, follow the process.	re a small business of h-flow statement, an	debtor, you d federal ir	nust attach your ncome tax return
	debtor?	$\overline{\mathbf{V}}$	No.	I am not filing under Chapter 11.				
		For a definition of small business debtor, see 11 U.S.C. § 101(51D).		No.	I am filing under Chapter 11, but I am NOT a the Bankruptcy Code.	small business debt	or according	ng to the definition in
	11 U.S.			Yes.	I am filing under Chapter 11 and I am a smal Bankruptcy Code.	l business debtor ac	cording to	the definition in the
P	art 4:	Report If You Ov	vn o	r Hav	e Any Hazardous Property or Any P	roperty That Ne	eds Imn	nediate Attention
14	Do you	own or have any		No				
	propert alleged immine	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable			What is the hazard?			
	hazard to public health or safety? Or do you own any property that needs immediate attention?				If immediate attention is needed, why is it ne	eded?		
	perisha livestoc	mple, do you own ble goods, or k that must be fed, or			Where is the property?			
	repairs?	ng that needs urgent						
					City		State	ZIP Code

Debtor 1 Greg D Sorensen

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not require	d to receive a briefing about
credit counselin	g because of:
☐ Incapacity.	I have a mental illness or a mer

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Greg D Sorensen			Case number (if known)					
Р	art 6:	Answer These Q	uesti	ions for Repo	rting Purpos	ses		
16.	What ki	ind of debts do you	16a.	-	an individual propins 16b.	sumer debts? Consumer dimarily for a personal, family		re defined in 11 U.S.C. § 101(8) usehold purpose."
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17.					
			16c.	State the type of	of debts you owe	e that are not consumer or bu	ısines	s debts.
17.	Are you	u filing under r 7?	V	No. I am not fi	iling under Chap	ter 7. Go to line 18.		
	any exe exclude adminis are paid availab	estimate that after empt property is ed and strative expenses d that funds will be le for distribution ecured creditors?		-	•	•	-	xempt property is excluded and to distribute to unsecured creditors?
18.		any creditors do timate that you		1-49 50-99 100-199 200-999		1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000
19.		uch do you te your assets to th?		\$0-\$50,000 \$50,001-\$100,00 \$100,001-\$500,0 \$500,001-\$1 mill	000	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.		uch do you te your liabilities to		\$0-\$50,000 \$50,001-\$100,00 \$100,001-\$500,0 \$500,001-\$1 mill	000	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion

Debtor 1	Greg D Sorensen		Case number (if known)				
Part 7:	Sign Below						
For you	_	I have examined this petition, and I declare under and correct.	penalty of perjury that the information provided is true				
			re that I may proceed, if eligible, under Chapter 7, 11, 12, d the relief available under each chapter, and I choose to				
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.					
			g property, or obtaining money or property by fraud in nes up to \$250,000, or imprisonment for up to 20 years,				
		X /s/ Greg D Sorensen	_ x				
		Greg D Sorensen, Debtor 1	Signature of Debtor 2				
		Executed on 05/24/2017	Executed on				

MM / DD / YYYY

MM / DD / YYYY

Debtor 1	Greg D Sorensen		Case number (if	know	n)			
For your at epresente	torney, if you are d by one	eligibility to proceed under Chap	amed in this petition, declare that I ter 7, 11, 12, or 13 of title 11, Unite ter for which the person is eligible.	ed Sta	tes Code, and have explained the			
f you are not represented by an attorney, you do not need to file this page.		relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.						
		X /s/ William H. Lively, Jr. Signature of Attorney for Deb		Date	05/24/2017 MM / DD / YYYY			
		William H. Lively, Jr.						
		William H. Lively, Jr., P. (Firm Name	С.					
		432 S. Bonner Ave. Number Street						
		Tyler City	TX State		75702 ZIP Code			
		Contact phone (903) 593- 3	3001 Email address _					

State

00786066

Bar number

Fill in this info	ormation to ide	ntify your case	and this filing:		
Debtor 1	Greg	D	Sorensen		
200101	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ban	kruptcy Court for th	e: EASTERN DI S	STRICT OF TEXAS		
Case number				☐ Check	if this is an
(if known)				_	ed filing
Official Form	106Δ/R				
Schedule A/I					12/15
the asset in the car filing together, bot sheet to this form.	tegory where you t h are equally respo On the top of any	hink it fits best. I onsible for supply additional pages	List an asset only once. If an ass Be as complete and accurate as pring correct information. If more write your name and case numbers.	possible. If two married pe space is needed, attach a s per (if known). Answer evel	ople are separate y question.
Part 1: Des	cribe Each Res	sidence, Buildi	ng, Land, or Other Real Es	tate fou Own or have	an interest in
☑ No. Go to		equitable interes	t in any residence, building, land	I, or similar property?	
	•	-	of your entries from Part 1, inclurite that number here	_	\$0.00
Part 2: Des	scribe Your Veh	icles		•	
you own that somed		ou lease a vehicle	n any vehicles, whether they are also report it on Schedule G: Executive metercucies	_	•
No ✓ Yes	ucks, tractors, spo	it utility veriloles,	motorcycles		
3.1. Make: Model:	Harley Davids	Check or	an interest in the property? e. or 1 only	Do not deduct secured clair amount of any secured clair Creditors Who Have Claims	ms on Schedule D:
Year:	_	Debt	or 2 only	Current value of the	Current value of the
Approximate mileag	ie.		or 1 and Debtor 2 only	entire property?	portion you own?
Other information:		— At lea	ast one of the debtors and another	\$7,000.00	\$7,000.00
Harley Davidson	motorcycle		ck if this is community property instructions)		
3.2.			an interest in the property?	Do not deduct secured clair	ms or exemptions. Put the
Make:	Jeep	Check or		amount of any secured clair	ms on Schedule D:
Model:	Wrangler		or 1 only	Creditors Who Have Claims	
Year:	2015	_	or 2 only	Current value of the entire property?	Current value of the portion you own?
Approximate mileag	je: 11,000		or 1 and Debtor 2 only ast one of the debtors and another	\$40,000.00	\$40,000.00
Other information:				ψ-0,000.00	Ψ+υ,υυυ.υυ
2015 Jeep Wrang miles)	gler (approx. 110		k if this is community property instructions)		

Debt	or 1	Greg D Sorensen	Ca	ase number (if known)	
4.		eles: Boats, trailers, motors,	s, ATVs and other recreational vehicles, other ve personal watercraft, fishing vessels, snowmobiles,		
2009	e: el: :	Polaris Razor 2009	Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and anothe □ Check if this is community property (see instructions)		ims on Schedule D: as Secured by Property. Current value of the portion you own? \$5,000.00
4.2. Make Mode Year	el: :	2008	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured clai amount of any secured cla Creditors Who Have Claim Current value of the entire property?	ims on <i>Schedule D:</i>
	r inform single	nation: axle trailer	At least one of the debtors and anothe	\$500.00	\$500.00
Pa	entries	Describe Your Per	(see instructions) on you own for all of your entries from Part 2, inc hed for Part 2. Write that number here sonal and Household Items itable interest in any of the following items?		\$52,500.00 Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Examp No		iture, linens, china, kitchenware		ATTO 00
7.	Electron Examp	les: Televisions and radios music collections; elec	appliances ; audio, video, stereo, and digital equipment; computronic devices including cell phones, cameras, medi	•	\$750.00
8.	Examp ✓ No	stamp, coin, or baseba	; paintings, prints, or other artwork; books, pictures, all card collections; other collections, memorabilia, co		
9.	Examp ✓ No	canoes and kayaks; ca	es exercise, and other hobby equipment; bicycles, pool arpentry tools; musical instruments	tables, golf clubs, skis;	

Deb	tor 1	Greg D Sorensen	Case number (if known)	
10.	Firearms		ammunition, and related equipment	
	:	s. Tistois, filles, silotguils, a	animumion, and related equipment	
	☐ No ✓ Yes.	Describe See continu	uation page(s).	\$300.00
11.	Clothes Example	s: Everyday clothes, furs, le	eather coats, designer wear, shoes, accessories	
	□ No ☑ Yes.	Describe clothing		\$50.00
12.	Jewelry Example	s: Everyday jewelry, costum gold, silver	ne jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	
	✓ No ☐ Yes.	Describe		
13.		n animals s: Dogs, cats, birds, horses		
	☐ No ☑ Yes.	Describe 3 dogs		\$1.00
14.	Any other	-	l items you did not already list, including any health aids you	
	_	Give specific mation		
15.			entries from Part 3, including any entries for pages you have ber here	\$1,101.00
Pa	art 4:	Describe Your Finan	cial Assets	
Doy	ou own o	or have any legal or equita	ble interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Example	s: Money you have in your v	wallet, in your home, in a safe deposit box, and on hand when you file your	
	✓ No Yes.			
17	Dona-!	of manay		
17.	-		ner financial accounts; certificates of deposit; shares in credit unions, ther similar institutions. If you have multiple accounts with the same	
	□ No ☑ Yes.		Institution name:	
	17.1	Checking account:	Checking account w/Texas Bank & Trust	\$35.00
	17.2	2. Checking account:	business Checking account w/Bancorp South	\$1,000.00
18.		nutual funds, or publicly to s: Bond funds, investment a	raded stocks accounts with brokerage firms, money market accounts	
	✓ No	Institutio	on or issuer name:	

Debt	or 1 Greg D Sorensen Ca	ase number (if known)
19.	Non-publicly traded stock and interests in incorporated and unincorporated busi an interest in an LLC, partnership, and joint venture	nesses, including
	✓ No Yes. Give specific information about them	% of ownership:
20.	Government and corporate bonds and other negotiable and non-negotiable instru Negotiable instruments include personal checks, cashiers' checks, promissory notes, Non-negotiable instruments are those you cannot transfer to someone by signing or de	and money orders.
	✓ No Yes. Give specific information about them Issuer name:	
21.	Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or profit-sharing plans	other pension or
	 No Yes. List each account separately. Type of account: Institution name: 	
22.	Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or <i>Examples:</i> Agreements with landlords, prepaid rent, public utilities (electric, gas, wate companies, or others	· · ·
	✓ No Yes Institution name or individual:	
23.	Annuities (A contract for a specific periodic payment of money to you, either for life of No ☐ Yes	or for a number of years)
24.	Interests in an education IRA, in an account in a qualified ABLE program, or under 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	er a qualified state tuition program.
	✓ No ☐ Yes Institution name and description. Separately file the record	rds of any interests. 11 U.S.C. § 521(c)
25.	Trusts, equitable or future interests in property (other than anything listed in line powers exercisable for your benefit	1), and rights or
	✓ No✓ Yes. Give specific information about them	
26.	Patents, copyrights, trademarks, trade secrets, and other intellectual property; Examples: Internet domain names, websites, proceeds from royalties and licensing against the company of	greements
	✓ No Yes. Give specific information about them	
27.	Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liqu ✓ No	uor licenses, professional licenses
	Yes. Give specific information about them	

Deb	Greg D Sorensen		Case number (if known)	
Mor	ey or property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you			
	✓ No Yes. Give specific information about them, including whether you already filed the returns and the tax years	er	State	
			Loca	li
29.	Family support Examples: Past due or lump sun ✓ No	n alimony, spousal support, child	support, maintenance, divorce settlement, prop	erty settlement
	Yes. Give specific information	on	Alimony:	
			Maintenance:	
			Support:	
			Divorce settleme	ent:
				ent:
31.	No ☐ Yes. Give specific information Interests in insurance policies		count (HSA); credit, homeowner's, or renter's inst	
	No ✓ Yes. Name the insurance company of each policy	·		
	and list its value	Company name:	Beneficiary:	Surrender or refund value:
		term life policy	Kimberly Sorensen, spouse	\$175,000.00
	entitled to receive property becau ✓ No ☐ Yes. Give specific information	ng trust, expect proceeds from a use someone has died	life insurance policy, or are currently	
33.	Examples: Accidents, employment No Yes. Describe each claim	ent disputes, insurance claims, or	awsuit or made a demand for payment rights to sue	
34.	Other contingent and unliquidation rights to set off claims No Yes. Describe each claim		luding counterclaims of the debtor and	
2F				
აე.	Any financial assets you did no	π aireaαy iist		
	✓ No Yes. Give specific information	on		

Deb	otor 1	Greg D Sorensen	Case number (if known)	
36.		e dollar value of all of your entries from Part 4, including any entries fed for Part 4. Write that number here		\$176,035.00
P	art 5:	Describe Any Business-Related Property You Own or Ha	ave an Interest In. List any	real estate in Part 1.
37.	Do you	ı own or have any legal or equitable interest in any business-related p	property?	
	_	. Go to Part 6. s. Go to line 38.		
				Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accour	nts receivable or commissions you already earned		-
	✓ No			
	_	s. Describe		
39.		equipment, furnishings, and supplies les: Business-related computers, software, modems, printers, copiers, fax desks, chairs, electronic devices	x machines, rugs, telephones,	
	□ No ☑ Yes	s. Describe computer, meat smoker, 2 freezers, walk in cooler freezer, food warmer, 3 bread warmers, 5 small for 10 burner stove, grill, deep fryers, vent-a-hood		\$5,000.00
40.	Machir	nery, fixtures, equipment, supplies you use in business, and tools of y	your trade	
	□ No			
	√ Yes	s. Describe 2011 Toyota Tundra (approx. 70000 miles) used for catering		\$22,755.00
41.	Invento	ory		
	✓ No □ Yes	s. Describe		
42.	Interes	ts in partnerships or joint ventures		
	✓ No ☐ Yes	s. Describe Name of entity:	% of ownership:	
43.	Custon	ner lists, mailing lists, or other compilations		
	☑ No ☐ Yes	s. Do your lists include personally identifiable information (as defined No Yes. Describe	d in 11 U.S.C. § 101(41A))?	
44.	Any bu	siness-related property you did not already list		
	✓ No ☐ Yes	s. Give specific information.		
45.		e dollar value of all of your entries from Part 5, including any entries fed for Part 5. Write that number here		\$27,755.00

Deb	btor 1	Greg D Sorensen	Case number (if known)		
P	art 6:	Describe Any Farm- and Commercial Fishing-Related If you own or have an interest in farmland, list it in Part 1.		erest In.	
46.	Do yo	u own or have any legal or equitable interest in any farm- or comm	nercial fishing-related property?		
		o. Go to Part 7. es. Go to line 47.			
			port Do n	rent value of the ion you own? not deduct secured ns or exemptions.	
47.	Farm a	animals ples: Livestock, poultry, farm-raised fish			
	∠xamp No				
	Ye				
48.	Crops	either growing or harvested			
		o es. Give specific formation			
49.	Farm	and fishing equipment, implements, machinery, fixtures, and tools	s of trade		
	☑ No				
50.	Farm	and fishing supplies, chemicals, and feed			
	☑ No				
51.	Any fa	arm- and commercial fishing-related property you did not already I	list		
		o es. Give specific formation			
52.		ne dollar value of all of your entries from Part 6, including any entr ned for Part 6. Write that number here		\$0.00	
P	art 7:	Describe All Property You Own or Have an Interest in	n That You Did Not List Above		
53.		u have other property of any kind you did not already list? bles: Season tickets, country club membership			
	□ No	o es. Give specific information.			
	_	nisc. hand tools		\$450.00	
5 4	A -1 -1 4'	to della value of all of commentation from Dant 7. Write that some		\$450.00	
54.	Add tr	he dollar value of all of your entries from Part 7. Write that number	r nere — —		

Debtor 1 **Greg D Sorensen** Case number (if known) Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2...... \$0.00 56. Part 2: Total vehicles, line 5 \$52,500.00 \$1,101.00 57. Part 3: Total personal and household items, line 15 58. Part 4: Total financial assets, line 36 \$176,035.00 59. Part 5: Total business-related property, line 45 \$27,755.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$450.00 Copy personal \$257,841.00 **62.** Total personal property. Add lines 56 through 61..... \$257,841.00 property total 63. Total of all property on Schedule A/B. Add line 55 + line 62..... \$257,841.00

Debtor 1	Greg D Sorensen	Case number (if known)	
		_	
10. Firea	rms (details):		
(2) 9	mm pistols		\$200.00
shot	aun		\$100.00

Fill in this inf	ormation to i	dentify your o	case:			
Debtor 1	Greg First Name	D Middle Name	Sorenser	1		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	e Last Name			
1			N DISTRICT OF TE	XAS	<u>. </u>	☐ Check if this is an
Case number (if known)						amended filing
Official Form	106C					
Schedule C:	The Prope	erty You Cl	aim as Exemp	ot		04/16
Using the property	you listed on Scill out and attach	<i>hedule A/B: Prop</i> e to this page as m	erty (Official Form 106	SA/B)) as your source, list the	esponsible for supplying correct information. e property that you claim as exempt. If more ssary. On the top of any additional pages,
is to state a speci exempted up to the receive certain be exemption of 100°	fic dollar amoun ne amount of any nefits, and tax-e % of fair market	at as exempt. Alt y applicable stat exempt retiremer value under a la	ternatively, you may utory limit. Some ex nt fundsmay be unl w that limits the exe	claii emp imite mpti	m the full fair market votionssuch as those ed in dollar amount.	you claim. One way of doing so value of the property being for health aids, rights to However, if you claim an ar amount and the value of the le statutory amount.
Part 1: Ide	entify the Pro	perty You Cla	im as Exempt			
1. Which set of	exemptions are	you claiming?	Check one only,	even	if your spouse is filing	with you.
سخا	-		kruptcy exemptions. J.S.C. § 522(b)(2)	11 U	.S.C. § 522(b)(3)	
2. For any prop	erty you list on	Schedule A/B th	at you claim as exen	npt, 1	fill in the information	below.
Brief description of Schedule A/B that			Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B		eck only one box for th exemption	
Brief description: Harley Davidsor	n motorcycle		\$7,000.00	\square	\$7,000.00 100% of fair market	Tex. Prop. Code §§ 42.001(a), 42.002(a)(9)
Line from Schedule	e A/B: 3.1				value, up to any applicable statutory limit	
Brief description:			\$5,000.00	\square	\$5,000.00	Tex. Prop. Code §§ 42.001(a),
Line from Schedule					100% of fair market value, up to any applicable statutory limit	42.002(a)(9)
(Subject to ad	ljustment on 4/01	/19 and every 3 y		es fi	led on or after the date	
Yes. Dic		property covered	by the exemption with	nın 1	,215 days before you fi	iled this case?

Debtor 1 Greg D Sorensen Case number (if known) Part 2: **Additional Page** Brief description of the property and line on Current value of Amount of the Specific laws that allow exemption Schedule A/B that lists this property exemption you claim the portion you own Copy the value from Check only one box for Schedule A/B each exemption Brief description: \$750.00 \$750.00 Tex. Prop. Code §§ 42.001(a), $\overline{\mathbf{Q}}$ furniture, appliances 100% of fair market 42.002(a)(1) value, up to any Line from Schedule A/B: 6 applicable statutory limit Brief description: \$200.00 Tex. Prop. Code §§ 42.001(a), \$200.00 $\overline{\mathbf{A}}$ (2) 9 mm pistols 100% of fair market 42.002(a)(7) value, up to any Line from Schedule A/B: 10 applicable statutory limit Brief description: \$50.00 \$50.00 Tex. Prop. Code §§ 42.001(a), $\overline{\mathbf{Q}}$ 42.002(a)(5) clothing 100% of fair market value, up to any Line from Schedule A/B: 11 applicable statutory limit Brief description: \$1.00 \$1.00 Tex. Prop. Code §§ 42.001(a), $\overline{\mathbf{Q}}$ 42.002(a)(11) 3 dogs 100% of fair market value, up to any Line from Schedule A/B: 13 applicable statutory limit Brief description: \$175,000.00 \$175,000.00 Tex. Ins. Code §§ 1108.001, $\overline{\mathbf{V}}$ term life policy 100% of fair market 1108.051 value, up to any Line from Schedule A/B: 31 applicable statutory limit Tex. Prop. Code §§ 42.001(a), Brief description: \$5,000.00 $\overline{\mathbf{V}}$ \$5,000.00 computer, meat smoker, 2 freezers, walk 100% of fair market 42.002(a)(4) in cooler, dessert cooler, upright freezer, value, up to any applicable statutory food warmer, 3 bread warmers, 5 small limit food warmers, chest freezer, 10 burner stove, grill, deep fryers, vent-a-hood Line from Schedule A/B: 39 Brief description: \$22,755.00 \$7,491.89 Tex. Prop. Code §§ 42.001(a), $\overline{\mathbf{Q}}$ 2011 Toyota Tundra (approx. 70000 miles) 100% of fair market 42.002(a)(4) used for catering value, up to any

Line from Schedule A/B: 40

applicable statutory

limit

Fill to this tot		landife	-			
Debtor 1	ormation to id	lentify your case	Sorensen			
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for	the: EASTERN DIS	TRICT OF TEXAS			
Case number	. ,				_	
(if known)					Check if this is amended filling	
Official Form	106D					,
		Who Hove Cla	ima Casurad b	y Droporty		40/45
Schedule D:	Creditors	wno nave Cia	ims Secured b	y Property		12/15
correct informatio On the top of any 1. Do any credit No. Che Yes. Fill Part 1: Lis 2. List all secure claim, list the creditor has a	 No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. ✓ Yes. Fill in all of the information below. Part 1: List All Secured Claims					
	c.	Describe the	property that	value of collateral	claim	If any
2.1		secures the		\$43,094.48	\$40,000.00	\$3,094.48
Ally Bank Creditor's name		2015 Jeep 1	Wrangler			
PO Box 130424 Number Street						
			te you file, the claim is	: Check all that apply.		
Saint Paul	MN 55113	Continge				
City	State ZIP Code					
Who owes the deb	ot? Check one.	Nature of lie	n. Check all that apply			
Debtor 1 only		☐ An agree	ment you made (such a	s mortgage or secured	car loan)	
Debtor 2 only	Nobtor 2 only	Statutory	lien (such as tax lien, r	nechanic's lien)		
Debtor 1 and D At least one of	the debtors and a	nother \Box	it lien from a lawsuit			
Check if this o	laim relates	PMSI	cluding a right to offset)			
Date debt was inc	•	Last 4 digits	of account number	0 8 0 1		

Add the dollar value of your entries in Column A on this page. Write that number here:

\$43,094.48

Debtor 1 Greg D Sorensen		_ Case number (if	known)	
Additional Page Part 1: After listing any entries on sequentially from the previous		Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
Capital One Auto Finance Creditor's name c/o Ascension Capital Group Number Street PO Box 201347 Arlington TX 76006 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	Describe the property that secures the claim: toyota tundra As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, med Judgment lien from a lawsuit Judgment (including a right to offset) Automobile	mortgage or secured	\$22,755.00 car loan)	
Date debt was incurred 11/2013	Last 4 digits of account number	1 0 0 1		
E.D. Sorensen Creditor's name 500 E. Travis Number Street	Describe the property that secures the claim: building rent	Unknown	\$0.00	Unknown
Marshall City State ZIP Code Who owes the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only ☑ At least one of the debtors and another ☑ Check if this claim relates to a community debt	As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, med Judgment lien from a lawsuit Other (including a right to offset) Contract/Lease	mortgage or secured	car loan)	
Date debt was incurred	Last 4 digits of account number			
building rent				

Add the dollar value of your entries in Column A on this page. Write that number here:

\$15,263.11

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$58,357.59

Fill in this inf	ormation to i	dentify your o	case:			
Debtor 1	Greg First Name	D Middle Name	Sorensen Last Name			
	riistivaine	Middle Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
(epeace,g)						
United States Ba	nkruptcy Court fo	r the: EASTERN	I DISTRICT OF TEXAS			
Case number					Check if this is a	an
(if known)				_	amended filing	
Official Form	106E/F					
Schedule E/	F: Creditor	s Who Hav	e Unsecured Claims			12/15
on Schedule A/B: Do not include an If more space is n to this page. On t	Property (Officially creditors with leeded, copy the label top of any ad	al Form 106A/B) partially secured Part you need, f ditional pages, v	racts or unexpired leases that cou and on Schedule G: Executory Co d claims that are listed in Schedule fill it out, number the entries in the write your name and case number secured Claims	ontracts and Unexpire e D: Creditors Who H boxes on the left. A	ed Leases (Officia old Claims Secur	ed by Property.
			ms against you?			
□ No. Go t		,	agamer year			
Yes.						
claim. For ea show both pric more space is claim, list the	ch claim listed, id ority and nonprior s needed for priori other creditors in	entify what type of ity amounts. As r ty unsecured clai Part 3.	a creditor has more than one priority of claim it is. If a claim has both prior much as possible, list the claims in a time, fill out the Continuation Page of the instructions for this form in the ins	rity and nonpriority am Iphabetical order acco Part 1. If more than o	ounts, list that clain	m here and or's name. If
, ,	,	·		Total claim	Priority amount	Nonpriority amount
2.1				\$4,345.00	\$4,345.00	\$0.00
William H. Lively			- Last 4 digits of account number			
Priority Creditor's Nam 432 S. Bonner A			· ·			
Number Street			When was the debt incurred?	06/22/2016	-	
			- As of the date you file, the claim	is: Check all that app	ly.	
			Contingent Unliquidated			
Tyler City	TX State	75702 ZIP Code	- Disputed			
Who incurred the			Type of PRIORITY unsecured cla	aim·		
Debtor 1 only			☐ Domestic support obligations			
Debtor 2 only	Nahtan Olambi		Taxes and certain other debts		ent	
Debtor 1 and D At least one of	the debtors and a	another	Claims for death or personal interviewed	njury while you were		
✓ Check if this o			intoxicated ✓ Other. Specify			
Is the claim subje		•	Attorney fees for this cas	е		
No No			-			
☐ Yes						

Debtor 1	Greg D Sorensen	Case number (if known)	
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims	
4. List a lf a cretype o	Yes Il of your nonpriority unsecured claims editor has more than one nonpriority unse of claim it is. Do not list claims already inc	I claims against you? . Submit this form to the court with your other schedules. in the alphabetical order of the creditor who holds each claim. cured claim, list the creditor separately for each claim. For each claim listed luded in Part 1. If more than one creditor holds a particular claim, list the othursecured claims, fill out the Continuation Page of Part 2.	•
	,		Total claim
Blooming City Who incur Debtor Debtor Debtor At leas	State ZIP Code red the debt? Check one. 1 only 2 only 1 and Debtor 2 only it one of the debtors and another if this claim is for a community debt	Last 4 digits of account number 5 8 7 9 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for -Directy	\$175.04
No Yes 4.2 Christy R Nonpriority C 1602 She Number Longview City Who incur Debtor Debtor Debtor At leas Y Check	TX 75604 State ZIP Code red the debt? Check one.	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Settlement	\$11,102.88

Debtor 1 Greg D Sorensen	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.3		\$4,084.42
Comenity Capital Bank/Paypal Credit	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
c/o Weinstein & Riley PS Number Street	As of the date you file, the claim is: Check all that apply.	
2001 Western Ave., Ste. 400	_ Contingent	
	Unliquidated	
Seattle WA 98121	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Credit Account	
Is the claim subject to offset?	Orean Account	
✓ No		
Yes		
4.4		\$2,694.36
Credit One Bank Na	Last 4 digits of account number8632	
Nonpriority Creditor's Name PO Box 98873	When was the debt incurred? 03/2005	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Las Vegas NV 89193		
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No		
Yes		
4.5		\$8,899.93
Discover Financial	Last 4 digits of account number 0 9 9 9	Ψ0,033.33
Nonpriority Creditor's Name	When was the debt incurred? 06/2009	
Attn: Bankruptcy	99.200	
Number Street PO Box 3025	As of the date you file, the claim is: Check all that apply. — Contingent	
	Unliquidated	
Nava Alkana	Disputed	
New Albany OH 43054 City State ZIP Code	Type of NONERIORITY uncopured eleims	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No □ Yes		
—		

Debtor 1 Greg D Sorensen	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.6		\$3,181.81
Synchrony Bank	Last 4 digits of account number 3 3 9 5	·
Nonpriority Creditor's Name	When was the debt incurred? 09/2013	
PO Box 103104 Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	_ ☐ Contingent	
	Unliquidated	
	─ ☐ Disputed	
Roswell GA 30076		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Charge Account	
Is the claim subject to offset?	onargo Aoooan	
✓ No		
Yes		
4.7		\$18,123.18
Synchrony Bank	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
c/o PRA Receivables Management	As of the date you file, the claim is: Check all that apply.	
Number Street PO Box 41021	_ ☐ Contingent	
	_ ☐ Unliquidated	
	— ☐ Disputed	
Norfolk VA 23541		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another		
☐ Check if this claim is for a community debt	Collecting for -Sam's Club	
Is the claim subject to offset?	Concoming for County Class	
✓ No		
Yes		
4.8		\$10,280.40
Synchrony Bank/Lowes	Last 4 digits of account number 7 9 4 1	
Nonpriority Creditor's Name	When was the debt incurred? 05/2009	
PO Box 965064 Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	_ ☐ Contingent	
	Unliquidated	
	─	
Orlando FL 32896		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another		
Check if this claim is for a community debt	Charge Account	
Is the claim subject to offset?	go / 1000uiii	
No		
Yes		

Debtor 1 Greg D Sorensen	Case number (if known)	Case number (if known)					
Part 2: Your NONPRIORITY Unsecured Claims Continuation Page							
After listing any entries on this page, number the previous page.	lot	tal claim					
Synchrony Bank/Lowes Nonpriority Creditor's Name PO Box 965064 Number Street	Last 4 digits of account number 5 5 8 6 When was the debt incurred? 04/2015 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated						
Orlando City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Charge Account						

Case number (if known)

Part 3: List Ot	thers to Be	e Notified Ab	out a Debt	That Y	ou Already	/ Lis	sted
For example, if a creditor in Parts 1	collection ag I or 2, then li ted in Parts	gency is trying t ist the collection 1 or 2, list the a	to collect from n agency here dditional cred	you fo . Simil itors he	r a debt you d arly, if you ha	we n	bt that you already listed in Parts 1 or 2. to someone else, list the original nore than one creditor for any of the have additional parties to be notified for
Calvary SPV I, LLC			On whic	h entry	in Part 1 or P	art 2	did you list the original creditor?
^{Name} 500 Summit Lake Dr	rive, Ste 40	0	Line	of	(Check one):	П	Part 1: Creditors with Priority Unsecured Claims
Number Street	,					_	Part 2: Creditors with Nonpriority Unsecured Claims
			act 4 di	aite of	account num	hor	
Valhalla City	NY State	10595 ZIP Code		gits of	account num	Dei	
Directv, LLC			On whic	h entry	in Part 1 or P	art 2	did you list the original creditor?
Name by American Infosol	urce LP		Line	of	(Check one):	П	Part 1: Creditors with Priority Unsecured Claims
Number Street PO Box 5008					,		Part 2: Creditors with Nonpriority Unsecured Claims
			— Last 4 di	gits of	account num	ber	
Carol Stream City	IL State	60197 ZIP Code					
First National Bank	of Hughes	Springs	On whic	h entry	in Part 1 or P	art 2	did you list the original creditor?
Name P.O. Box 817			Line	of	(Check one):		Part 1: Creditors with Priority Unsecured Claims
Number Street							Part 2: Creditors with Nonpriority Unsecured Claims
			Last 4 di	gits of	account num	ber	3 3 0 4
Omaha City	TX State	75571 ZIP Code					<u> </u>
Glen Patrick			On whic	h entry	in Part 1 or P	art 2	2 did you list the original creditor?
Name 100 E Ferguson St, S	Suite 400		Line	of	(Check one):	П	Part 1: Creditors with Priority Unsecured Claims
Number Street							Part 2: Creditors with Nonpriority Unsecured Claims
Tylor	тх	75702	— Last 4 di	gits of	account num	ber	
Tyler City	State	ZIP Code					
Harley Davidson Fir	nancial		On whic	h entry	in Part 1 or P	art 2	did you list the original creditor?
Name <mark>Attention: Bankrupt</mark>	су		Line	of	(Check one):		Part 1: Creditors with Priority Unsecured Claims
Number Street PO Box 9013				_			Part 2: Creditors with Nonpriority Unsecured Claims
Addison	тх	75001	Last 4 di	gits of	account num	ber	<u>4</u> <u>5</u> <u>4</u> <u>1</u>
City	State	ZIP Code					

Debtor 1

Greg D Sorensen

Debtor 1	Greg D Sorens	sen					Case	e number (if known)
Part 3:	List Others	to Be	Notified Abou	ut a Debt T	hat \	You Already	/ Lis	sted Continuation Page
IRS Name				On which	entry	in Part 1 or P	art 2	2 did you list the original creditor?
PO BOX 7	'346			Line	of	(Check one):	П	Part 1: Creditors with Priority Unsecured Claims
	Street			Required				Part 2: Creditors with Nonpriority Unsecured Claims
Dhile de lei	hio	D.A.	40404	Last 4 dig	its of	account num	ber	
Philadelpl City		PA State	19101 ZIP Code	_				
LVNV Fun	iding LLC			On which	entry	in Part 1 or P	art 2	2 did you list the original creditor?
Name c/o Resur	gent Capital Se	vices	i	Line	of	(Check one):	П	Part 1: Creditors with Priority Unsecured Claims
	Street					,		Part 2: Creditors with Nonpriority Unsecured Claims
Greenville	j	SC	29603-0587	Last 4 dig	its of	account num	ber	
City		State	ZIP Code	_				
Midland F	unding			On which	entry	in Part 1 or P	Part 2	2 did you list the original creditor?
PO Box 20				Line	of	(Check one):		Part 1: Creditors with Priority Unsecured Claims
Number	Street			_				Part 2: Creditors with Nonpriority Unsecured Claims
Warren		MI	48090	Last 4 dig	its of	account num	ber	
City		State	ZIP Code	_				
	he Attorney Ge	neral		On which	entry	in Part 1 or P	art 2	2 did you list the original creditor?
	port Division			Line	of	(Check one):		Part 1: Creditors with Priority Unsecured Claims
	Street ertson Road, St	e. 501		Required —	l Noti	ification		Part 2: Creditors with Nonpriority Unsecured Claims
				— Last 4 dig	its of	account num	ber	
Tyler City		TX State	75701 ZIP Code	_				
J.,		O LOLO	0000					
Office of t	he U.S. Trustee			_ On which	entry	in Part 1 or P	art 2	2 did you list the original creditor?
110 N. Co	llege, Ste. 300			Line	of	(Check one):		Part 1: Creditors with Priority Unsecured Claims
Number	Street			Required —	Noti	ification		Part 2: Creditors with Nonpriority Unsecured Claims
Tyler		TX	75702	— Last 4 dig	its of	account num	ber	
City		State	ZIP Code	_				
Reg Crdt	Ser			On which	entry	in Part 1 or P	art 2	2 did you list the original creditor?
1201 Jeffe	erson Str			Line	of	(Check one):		Part 1: Creditors with Priority Unsecured Claims
Number	Street			Collectin Commun	_	-Fidelity ons		Part 2: Creditors with Nonpriority Unsecured Claims
	on.	MO	63090	Last 4 dig	its of	account num	ber	9 3 0 3
City		State	ZIP Code	_				

Greg D S	orensen			Case number (if known)
Part 3: List Ot	hers to Be	Notified Abou	ut a Debt That You Already	Listed Continuation Page
Standing Chapter 13	3 Trustee		On which entry in Part 1 or P	art 2 did you list the original creditor?
Name 110 N. College, 12th	Floor		Line of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Number Street			Required Notification	Part 2: Creditors with Nonpriority Unsecured Claims
		75700	Last 4 digits of account num	per
Tyler City	TX State	75702 ZIP Code	_	
Texas Comptroller of	of Public Ac	counts	On which entry in Part 1 or P	art 2 did you list the original creditor?
Name Revenue Accounting	g Div-Bank	ruptcy Sectio	Line of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Number Street PO BOX 13528		, ,	Required Notification	Part 2: Creditors with Nonpriority Unsecured Claims
Austin	TX	78711-3528	Last 4 digits of account num	ber
City	State	ZIP Code	<u> </u>	
Texas Workforce Co	mmission		On which entry in Part 1 or P	art 2 did you list the original creditor?
Name P.O. BOX 149080			Line of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Number Street			Required Notification	Part 2: Creditors with Nonpriority Unsecured Claims
			─ ─ Last 4 digits of account num	ber
Austin City	TX State	78714-9080 ZIP Code	_	
United States Attorn	iey		On which entry in Part 1 or P	art 2 did you list the original creditor?
Name 110 North College			Line of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Number Street Ste. 700			Required Notification	Part 2: Creditors with Nonpriority Unsecured Claims
Tules	TV	75702	Last 4 digits of account num	ber
Tyler City	TX State	75702 ZIP Code	_	

Debtor 1	Greg D Sorensen	Case number (if known)

Part 4: Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only.
 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
nom runt r	6b.	Taxes and certain other debts you owe the government	6b.	\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. 🛨	\$4,345.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$4,345.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. +	. \$64,769.79
	6j.	Total. Add lines 6f through 6i.	6j.	\$64,769.79

Fill in this inf	ormation to	identify your cook			
Fill in this int	ormation to	identify your case:			
Debtor 1	Greg	D	Sorensen		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court fo	or the: EASTERN DISTR	CT OF TEXAS		
Case number				☐ Check if this is an	
(if known)				amended filing	
Official Form	106G				
					40/45
Schedule G:	Executor	y Contracts and U	nexpirea L	.eases	12/15
On the top of any and the top of any any and the top of any any any and any any any any any	additional page any executory of ck this box and f	es, write your name and ca contracts or unexpired lea file this form with the court v	ase number (if knuses? vith your other sol	it out, number the entries, and attach it to this page. nown). needules. You have nothing else to report on this form. are listed on Schedule A/B: Property (Official Form 106A/B).	
2. List separate is for (for exa	ly each person	or company with whom yo	ou have the cont	ract or lease. Then state what each contract or lease for this form in the instruction booklet for more examples of	
Person or	company with	whom you have the contra	act or lease	State what the contract or lease is for	
2.1 E.D. Sore	ensen			building rent	
Name				Contract to be ASSUMED	
500 E. Tra	avis Street			-	

TX State **75670**ZIP Code

Marshall City

Fill in t	this info	ormation to ide	entify your case			
Debtor 1		Greg	D	Sorensen		
		First Name	Middle Name	Last Name		
Debtor 2 (Spouse,		First Name	Middle Name	Last Name	—	
United S	tates Bar	nkruptcy Court for t	he: EASTERN DIS	TRICT OF TEXAS		
Case nui		aptoy Countries a	<u>= =</u>			
(if known						Check if this is an amended filing
						·
Official	Form	106H				
Sched	ule H:	Your Codel	otors			12/15
page. On 1. Do yo	the top	of any Additional I	Pages, write your n	er the entries in the beame and case number and case number and case, do not list eit	(if known). Answe	
☑ /	No. Go to Yes. Did No Yes In w Kim Nam	o line 3. your spouse, formed hich community states to be for your spouse, formed hickory	er spouse, or legal e		at the time?	eon, and Wisconsin.) e and current address of that person.
	Mar City	rshall	T Si	X 75670 ate ZIP Code		
perso credi Sche	on show itor on S edule D, S	n in line 2 again as chedule D (Officia Schedule E/F, or S	s a codebtor only if	that person is a gua dule E/F (Official Fo	ntor or cosigner. N n 106E/F), or Sched	ouse is filing with you. List the lake sure you have listed the lule G (Official Form 106G). Use
Co	olumn 1:	Your codebtor				The creditor to whom you owe the debt
					Check all sc	hedules that apply:
	orenser ame	n, Kimberly L			— ☐ Schedu	le D, line
_	07 Hicko	Ory Street			— ✓ Schedu	le E/F, line4.1
- NC	an IDCI	Jue Gt			_	le G, line
М	arshall		тх	75670	Afni	
Cit			State	ZIP Code		

Debto	Greg D Sorensen			Case number (if known)
	Additional Page to L	ist More Cod	ebtors	
	Column 1: Your codebtor			Column 2: The creditor to whom you owe the debt
				Check all schedules that apply:
3.2	Sorensen, Kimberly L			Schedule D, line 2.1
	507 Hickory			Schedule E/F, line
	Number Street			Schedule G, line
	Marshall	TX	75670	Ally Bank
	City	State	ZIP Code	
3.3	Sorensen, Kimberly L			Cabadula D lina
	Name 507 Hickory			Schedule D, line
	Number Street			Schedule E/F, line 5.1
				Schedule G, line
	Marshall City	TX State	75670 ZIP Code	Calvary SPV I, LLC
	, ,			
3.4	Sorensen, Kimberly L Name			Schedule D, line 2.2
	507 Hickory Number Street			Schedule E/F, line
	- Street			Schedule G, line
	Marshall	TX	75670	Capital One Auto Finance
	City	State	ZIP Code	
3.5	Sorensen, Kimberly L			Schedule D, line
	Name 507 Hickory			<u> </u>
	Number Street			<u> </u>
				Schedule G, line Christy Rice Miller
	Marshall City	TX State	75670 ZIP Code	
3.6	Sorensen, Kimberly L			
5.0	Name			Schedule D, line
	507 Hickory Number Street			Schedule E/F, line 4.3
				Schedule G, line
	Marshall	TX	75670	Comenity Capital Bank/Paypal Credit
	City	State	ZIP Code	
3.7	Sorensen, Kimberly L			Schedule D, line
	507 Hickory			
	Number Street			Schedule G, line
	Marshall	тх	75670	Credit One Bank Na
	City	State	ZIP Code	

Debtor	Greg D Sorensen			Case number (if known)
	Additional Page to Lis	st More Code	ebtors	
	Column 1: Your codebtor			Column 2: The creditor to whom you owe the debt
				Check all schedules that apply:
3.8	Sorensen, Kimberly L			Schedule D, line
	507 Hickory Number Street			Schedule E/F, line 5.2
	- Street			Schedule G, line
	Marshall	TX		Directv, LLC
	City	State	ZIP Code	
3.9	Sorensen, Kimberly L			Schedule D, line
	Number Street			Schedule E/F, line 4.5
				Schedule G, line
	Marshall City	TX State	75670 ZIP Code	Discover Financial
3.10	Sorensen, Kimberly L			Schedule D, line 2.3
	Name 507 Hickory			_
	Number Street			Schedule G, line
	Marshall	тх	75670	E.D. Sorensen
	City	State	ZIP Code	
3.11	Sorensen, Kimberly L			Schedule D, line
	507 Hickory Number Street			
				Schedule G, line
	Marshall	TX	75670	First National Bank of Hughes Springs
	City	State	ZIP Code	
3.12	Sorensen, Kimberly L			Schedule D, line
	507 Hickory Number Street			Schedule E/F, line 5.4
				Schedule G, line Glen Patrick
	Marshall City	TX State	75670 ZIP Code	Gien Faulek
3.13	Sorensen, Kimberly L			Schedule D, line
	Name 507 Hickory			
	Number Street			
	Marshall	TX	75670	Harley Davidson Financial
	City	State	ZIP Code	

Debto	Greg D Sorensen			Case number (if known)
	Additional Page to Li	st More Cod	ebtors	
	Column 1: Your codebtor			Column 2: The creditor to whom you owe the debt
				Check all schedules that apply:
3.14	Sorensen, Kimberly L			Schedule D, line
	507 Hickory Number Street			Schedule E/F, line 5.7
				Schedule G, line
	Marshall	TX	75670	LVNV Funding LLC
	City	State	ZIP Code	
3.15	Sorensen, Kimberly L			Schedule D, line
	507 Hickory			Schedule E/F, line 5.8
	Number Street			
				Schedule G, line Midland Funding
	Marshall City	TX State	75670 ZIP Code	
3.16	Sorensen, Kimberly L			Schedule D, line
	Name 507 Hickory			
	Number Street			
				Schedule G, line
	Marshall City	TX State	75670 ZIP Code	Reg Crdt Ser
	Oily 1	State	ZIF Code	
3.17	Sorensen, Kimberly L			Schedule D, line
	507 Hickory			
	Number Street			<u> </u>
				Schedule G, line Synchrony Bank
	Marshall City	TX State	75670 ZIP Code	— Sylicinolly Balik
	Caranaan Kimbarki I			
3.18	Sorensen, Kimberly L			Schedule D, line
	507 Hickory Number Street			Schedule E/F, line 4.7
				Schedule G, line
	Marshall	TX	75670	Synchrony Bank
	City	State	ZIP Code	
3.19	Sorensen, Kimberly L			
L 0.10	Name			Schedule D, line
	507 Hickory Number Street			Schedule E/F, line 4.8
				Schedule G, line
	Marshall	TX	75670	Synchrony Bank/Lowes
	Citv	State	ZIP Code	

Debtor 1	Greg D Sorensen			Case number (if known)
	Additional Page to Lis	t More Code	ebtors	
C	olumn 1: Your codebtor			Column 2: The creditor to whom you owe the debt Check all schedules that apply:
50 Na	orensen, Kimberly L ame 07 Hickory umber Street			Schedule D, line Schedule E/F, line4.9
M Cit	larshall ty	TX State	75670 ZIP Code	Schedule G, line Synchrony Bank/Lowes
50 Na	orensen, Kimberly L ame 07 Hickory umber Street			 Schedule D, line Schedule E/F, line
	larshall ty	TX State	75670 ZIP Code	Schedule G, line William H. Lively, Jr., P. C.

Fill in this inform	nation to identify	y your case:			
Debtor 1	Greg First Name	D Middle Name	Sorensen Last Name	Ch	eck if this is:
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	_	An amended filing
United States Bankruptcy Court for the:		EASTERN DISTRICT OF TEXAS		🗆	A supplement showing postpetition chapter 13 income as of the following date:
Case number (if known)					MM / DD / YYYY
Official Form 1	061				

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:	Describ	e Employmen	۱+

1.	Fill in your employment information.		Debtor 1			Debtor 2 or non-f	iling spou	se
	If you have more than one job, attach a separate page with information about additional employers.	Employment status Occupation	☐ Employed ☑ Not employed food service			✓ Employed☐ Not employedfood service	d	
	Include part-time, seasonal, or self-employed work.	Employer's name	self/Pic N Pay Deli		Pic N Pay Deli			
	Occupation may include student or homemaker, if it applies.	Employer's address	500 E. Travis Number Street		500 E. Travis Number Street			
			Marshall City	TX State	75670 Zip Code	Marshall City	TX State	75670 Zip Code
		How long employed the	,		_			_

Part 2: **Give Details About Monthly Income**

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

Car Dabter 4

Far Dahter 2 ar

				non-filing spouse
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$0.00	\$0.00
3.	Estimate and list monthly overtime pay.	3. +	\$0.00	\$0.00
4.	Calculate gross income. Add line 2 + line 3.	4.	\$0.00	\$0.00

Debt	or 1 Greg D Sorensen		Case num	nber (if known)	
			For Debtor 1	For Debtor 2 or non-filing spouse	
	Copy line 4 here	4.	\$0.00	\$0.00	•
5.	List all payroll deductions:				
	5a. Tax, Medicare, and Social Security deductions	5a.	\$0.00	\$0.00	
	5b. Mandatory contributions for retirement plans	5b.	\$0.00	<u>\$0.00</u>	
	5c. Voluntary contributions for retirement plans	5c.	\$0.00	\$0.00	
	5d. Required repayments of retirement fund loans	5d.	\$0.00	\$0.00	
	5e. Insurance	5e.	\$0.00	\$0.00	
	5f. Domestic support obligations	5f.	\$0.00	\$0.00	
	5g. Union dues	5g.	<u>\$0.00</u>	\$0.00	
	5h. Other deductions. Specify:	5h. +	\$0.00	\$0.00	
	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$.	6.	\$0.00	\$0.00	
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$0.00	\$0.00	
8.	List all other income regularly received:				
	8a. Net income from rental property and from operating a business, profession, or farm	8a.	\$2,965.34	\$0.00	
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.				
	8b. Interest and dividends	8b.	\$0.00	\$0.00	
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00	\$0.00	
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.				
	8d. Unemployment compensation	8d.	\$0.00	\$0.00	
	8e. Social Security	8e.	\$0.00	\$0.00	
	8f. Other government assistance that you regularly receive				
	Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.				
	Specify:	8f.	\$0.00	\$0.00	
	8g. Pension or retirement income	- 8g.	\$0.00	\$0.00	
	8h. Other monthly income.	og.	Ψ0.00	Ψ0.00	
	Specify: estimated income tax refunds	8h. 🛨	\$100.00	\$0.00	
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$3,065.34	\$0.00	
	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$3,065.34	+ \$0.00	\$3,065.34
	State all other regular contributions to the expenses that you list in S Include contributions from an unmarried partner, members of your housel friends or relatives.			r roommates, and othe	PF
	Do not include any amounts already included in lines 2-10 or amounts that	it are n	ot available to pay e	expenses listed in Sche	edule J.
	Specify:			11. +	\$0.00
	Add the amount in the last column of line 10 to the amount in line 11.			,	\$3,065.34
	income. Write that amount on the Summary of Your Assets and Liabilities if it applies.	s and C	Sertain Statistical Inf	ormation,	Combined monthly income
13.	Do you expect an increase or decrease within the year after you file t	his for	m?		
	✓ No. None. Yes. Explain:				

Debtor 1 Greg D Sorensen		Case number (if known)	
8a. Attached Statement (Debtor 1)			
	Pic N Pay Deli		
Gross Monthly Income:			\$20,000.00
Expense	Category	Amount	
building rent		\$2,250.00	
food/supplies		\$11,000.00	
utilities		\$1,250.00	
sales tax		\$1,680.00	
equipment rental		\$122.00	
Capital One	Auto Payments	\$367.00	
business insurance		\$251.66	
storage		\$114.00	
Total Monthly Expenses			\$17,034.66
Net Monthly Income:			\$2,965.34

F	ill in this inform	ation to identif	y your case:			Ch.	-1. :£ 4b:-		
	Debtor 1	Greg	D	Soren	sen	l	ck if this	s is: ended filing	
'	Debtor 1	Greg First Name	Middle Name	Last Nar			A supp	lement showing r 13 expenses a	
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Nar	me		followin		is of the
,	United States Bankr	uptcy Court for the:	EASTERN DIS	TRICT OF T	EXAS		MM / D	D / YYYY	
	Case number (if known)						, 2	-,	
Of	ficial Form 10	6J				J			
Sc	hedule J: Yo	 our Expenses	S						12/15
nan	rect information. If ne and case numbe	more space is ne	eded, attach anoth wer every question	ner sheet to tl	ing together, both ar his form. On the top				
1.	Is this a joint case	e?							
2.	No Yes	ebtor 2 live in a se s. Debtor 2 must file endents?	-	J-2, Expenses	s for Separate Housel Dependent's relati	onshi		2. Dependent's	Does dependent
	Do not list Debtor Debtor 2.	1 and \square	for each depender		Debtor 1 or Debtor	2		age	_ live with you? ☐ No
	Do not state the de names.	ependents'							Yes No Yes No Yes No No Yes No Yes
3.	Do your expenses expenses of peop yourself and your	le other than	☑ No □ Yes						No Yes
P	art 2: Estima	nte Your Ongoi	ng Monthly Exp	penses					
to r		of a date after the		-	re using this form as supplemental Sche			•	
	ude expenses paid h assistance and h							Your expens	ses
4.		ne ownership expe age payments and a					4	4	
	If not included in	•	•						
	4a. Real estate ta	axes					4	4a	\$35.00
	4b. Property, hom	neowner's, or renter	's insurance				4	4b	
	4c. Home mainte	nance, repair, and u	ıpkeep expenses				4	4c	
	4d. Homeowner's	association or con-	dominium dues				4	4d.	

Deb	tor 1 Greg D Sorensen	Case number (if known)	
		Your expense	s
5.	Additional mortgage payments for your residence, such as home equity loans	5.	
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a.	\$210.00
	6b. Water, sewer, garbage collection	6b	\$60.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	
	6d. Other. Specify: cellphones	6d.	\$275.00
7.	Food and housekeeping supplies	7.	\$300.00
8.	Childcare and children's education costs	8.	
9.	Clothing, laundry, and dry cleaning	9.	
10.	Personal care products and services	10.	
11.	Medical and dental expenses	11.	\$300.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$250.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	
14.	Charitable contributions and religious donations	14.	
15.	Insurance.		
	Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a	\$68.00
	15b. Health insurance	15b	
	15c. Vehicle insurance	15c	\$115.16
	15d. Other insurance. Specify: motorcycle insurance	15d.	\$62.09
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	
17	Specify: Installment or lease payments:	10.	
	17a. Car payments for Vehicle 1 Ally	17a.	\$759.09
	17b. Car payments for Vehicle 2	471	
	17c. Other. Specify:		
10	17d. Other. Specify: Vous payments of allimony, maintenance, and support that you did not report as	40	
ıd.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18	
19.	Other payments you make to support others who do not live with you.		
	Specify:	19.	

Debtor 1		Greg D Sorensen	Case number (if known)	
20.	Other Sche	r real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.		
	20a.	Mortgages on other property	20a.	
	20b.	Real estate taxes	20b.	
	20c.	Property, homeowner's, or renter's insurance	20c.	
	20d.	Maintenance, repair, and upkeep expenses	20d.	
	20e.	Homeowner's association or condominium dues	20e.	
21.	Other	r. Specify: spouse's auto & home insurance	21. + _	\$308.93
22.	Calcu	ulate your monthly expenses.	_	
	22a.	Add lines 4 through 21.	22a.	\$2,743.27
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b.	
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c	\$2,743.27
23.	Calcu	ulate your monthly net income.		
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$3,065.34
	23b.	Copy your monthly expenses from line 22c above.	23b. –	\$2,743.27
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	\$322.07
24.	Do yo	ou expect an increase or decrease in your expenses within the year after you fil	le this form?	
		xample, do you expect to finish paying for your car loan within the year or do you expent to increase or decrease because of a modification to the terms of your mortgage	, ,	
	1	No.		
		Yes. Explain here: None.		
		None.		

	Ca3C 17 20057	DOC 1 1 11CG 03/24/17	Entered 03/24/17 11:30:4	2 Desc Main Documen	11 1 age 43 01 37
Fill in this in	formation to	doutify your coop			
FIII IN this in	itormation to i	dentify your case			
Debtor 1	Greg	D	Sorensen	_	
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing	g) First Name	Middle Name	Last Name	_	
United States D	and winter Carrette	ur that EASTEDN DIS	TDICT OF TEVAS		
United States B	ankrupicy Coun ic	or the: EASTERN DIS	OTRICI OF TEXAS	-	
Case number					Check if this is an
(if known)				_	amended filing
Official Form	n 1065um			_	
Official Forn	11 10654111				
Summary of	of Your Asso	ets and Liabilit	ies and Certain St	atistical Informa	ation
correct informat	ion. Fill out all of	your schedules first;	ed people are filing togethe then complete the informa fill out a new Summary and	tion on this form. If yo	u are filing amended
Part 1: So	ummarize You	ır Assets			
					Your assets

		Your assets Value of what you own
	Schedule A/B: Property (Official Form 106A/B)	
	1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$257,841.0
	1c. Copy line 63, Total of all property on Schedule A/B	\$257,841.00
Ρ	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$58,357.59
		\$4.045.0
	2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$4,345.0

Schedule I: Your Income (Official Form 106I)

Schedule J: Your Expenses (Official Form 106J)

Copy your combined monthly income from line 12 of Schedule I.....

Copy your monthly expenses from line 22c of Schedule J.....

\$3,065.34

\$2,743.27

12/15

Deb	otor 1	Greg D Sorensen	Case number (if known)
P	art 4:	Answer These Questions for Administrative and Statist	ical Records
6.	Are yo	ou filing for bankruptcy under Chapters 7, 11, or 13?	
	_	o. You have nothing to report on this part of the form. Check this box and ses	ubmit this form to the court with your other schedules.
7.	What k	kind of debt do you have?	
	Ľ	our debts are primarily consumer debts. Consumer debts are those "incumily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for stati	
		our debts are not primarily consumer debts. You have nothing to report on is form to the court with your other schedules.	on this part of the form. Check this box and submit
8.		the Statement of Your Current Monthly Income: Copy your total current m I Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	nonthly income from (\$1,154.02)
9.	Copy t	the following special categories of claims from Part 4, line 6 of Schedul	e <i>E/F:</i>
			Total claim

From Part 4 on Schedule E/F, copy the following:

From Fart 4 on Schedule L/F, copy the following.	
9a. Domestic support obligations. (Copy line 6a.)	\$0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d. Student loans. (Copy line 6f.)	\$0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$0.00
9g. Total. Add lines 9a through 9f.	\$0.00

Fill in this inf	ormation to	identify your case	:
Debtor 1	Greg First Name	D Middle Name	Sorensen Last Name
Debtor 2 (Spouse, if filing)		Middle Name	Last Name
United States Bar	nkruptcy Court fo	or the: EASTERN DIS	TRICT OF TEXAS
Case number (if known)			
Official Form	106Dec		
Declaration	About an	Individual Debt	or's Schedules

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	no is NOT an attorney to help you fill out bankruptcy forms?
No	to is not an attendy to help you in out bank uptcy forms:
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	have read the summary and schedules filed with this declaration and that they are
true and correct.	have read the summary and schedules filed with this declaration and that they are
Under penalty of perjury, I declare that I true and correct. X /s/ Greg D Sorensen Greg D Sorensen, Debtor 1	

12/15

					_		
F	ill in this info	ormation to ide	ntify your case	:			
D	ebtor 1	Greg First Name	D Middle Name	Sorensen Last Name			
	ebtor 2 Spouse, if filing)	First Name	Middle Name	Last Name			
υ	nited States Bar	nkruptcy Court for th	e: EASTERN DIS	TRICT OF TEXAS			
_	ase number known)					Check if this is an amended filing	
Of	ficial Form	107					
St	atement o	 f Financial A	ffairs for Ind	ividuals Filing for B	ankruptcy		04/16
yοι	ır name and ca	se number (if know	n). Answer every	separate sheet to this form. (question. tatus and Where You Li		tional pages, write	
1.	What is your of Married ☐ Not marrie	current marital stat	us?				
2.	☑ No		•	ther than where you live now ears. Do not include where you			
3.	(Community p		•	ouse or legal equivalent in a c zona, California, Idaho, Louisia		•	
	□ No ☑ Yes. Mak	e sure you fill out So	chedule H: Your Co	debtors (Official Form 106H).			

Der	ו וטו	Greg D Sorensen		Case nur	nber (if known)	
Р	art 2:	Explain the Sources of Y	our Income			
4.	Fill in the	u have any income from employme total amount of income you receive filing a joint case and you have its. Fill in the details.	ived from all jobs and all bus	inesses, including par	t-time activities.	endar years?
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions
From January 1 of the current year until the date you filed for bankruptcy:		-	Wages, commissions, bonuses, tips✓ Operating a business	\$74,000.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	
		calendar year: December 31, 2016) TYYYY	Wages, commissions, bonuses, tips✓ Operating a business	\$237,128.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	
		endar year before that: December 31, 2015) YYYY	Wages, commissions, bonuses, tips✓ Operating a business	\$322,282.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	
5.	Include unemp	u receive any other income during income regardless of whether that loyment; and other public benefit pambling and lottery winnings. If you 1.	income is taxable. Example ayments; pensions; rental inc	es of other income are come; interest; dividen	ds; money collected from law	vsuits; royalties;
	List ead	ch source and the gross income fro	m each source separately. [Do not include income	that you listed in line 4.	
	✓ No ☐ Yes	s. Fill in the details.				

Deb	otor 1	Greg D S	Sorensen	Case number (if known)
Р	art 3:	List Ce	ertain Payments You Made Before You Filed	d for Bankruptcy
6.	Are eith	er Debtor	1's or Debtor 2's debts primarily consumer debts?	
	□ No.		r Debtor 1 nor Debtor 2 has primarily consumer debtsed by an individual primarily for a personal, family, or hou	
		During t	the 90 days before you filed for bankruptcy, did you pay	any creditor a total of \$6,425* or more?
		☐ No.	Go to line 7.	
		☐ Yes.	. List below each creditor to whom you paid a total of \$6 total amount you paid that creditor. Do not include pay child support and alimony. Also, do not include payme	ments for domestic support obligations, such as
		* Subje	ct to adjustment on 4/01/19 and every 3 years after that	for cases filed on or after the date of adjustment.
	√ Yes	. Debtor	1 or Debtor 2 or both have primarily consumer debts	
		During t	the 90 days before you filed for bankruptcy, did you pay	any creditor a total of \$600 or more?
		✓ No.	Go to line 7.	
		☐ Yes.	. List below each creditor to whom you paid a total of \$6 creditor. Do not include payments for domestic supportation, do not include payments to an attorney for this base.	t obligations, such as child support and alimony.
7.	Insiders corporat agent, ir	include you tions of wh ncluding or	ich you are an officer, director, person in control, or own	on a debt you owed anyone who was an insider? ral partners; partnerships of which you are a general partner; er of 20% or more of their voting securities; and any managing S.C. § 101. Include payments for domestic support obligations
	✓ No ☐ Yes	. List all p	ayments to an insider.	
8.		l year befo ed an insid		ents or transfer any property on account of a debt that
	Include	payments	on debts guaranteed or cosigned by an insider.	
	☑ No ☐ Yes	. List all p	ayments that benefited an insider.	

Deb	otor 1	Greg D Sorensen	Case	Case number (if known)				
P	art 4:	Identify Legal Actions, R	epossessions, and Foreclosures					
9.	List all s	-	uptcy, were you a party in any lawsuit, cour ury cases, small claims actions, divorces, col		•	-		
	✓ No ✓ Yes. Fill in the details.							
10.	seized,	1 year before you filed for bankru or levied? all that apply and fill in the details b	elow.	ed, foreclosed,	, garnished, attach	ed,		
		Go to line 11. s. Fill in the information below.						
11.		•	ruptcy, did any creditor, including a bank c o make a payment because you owed a de		titution, set off any	′		
	✓ No ☐ Yes	s. Fill in the details.						
12.		1 year before you filed for bankrurs, a court-appointed receiver, a	ptcy, was any of your property in the poss custodian, or another official?	ession of an a	ssignee for the be	nefit of		
	✓ No ☐ Yes	S						
P	art 5:	List Certain Gifts and Co	ntributions					
13.	Within	2 years before you filed for bankı	ruptcy, did you give any gifts with a total va	alue of more th	an \$600 per perso	n?		
	□ No ✓ Yes	s. Fill in the details for each gift.						
	s with a person	total value of more than \$600	Describe the gifts John Deere lawnmower given to chi	ırch	Dates you gave the gifts	Value		
Ge	ne Evan		member	uron	6/2016	\$2,500.00		
Pers	son to who	om You Gave the Gift						
Num	nber Str	eet	_					
City		State ZIP Code	_					
Per	son's rela	ationship to you none	_					

Deb	otor 1	Greg D Sore	enser	1	Cas	se number (if k	nown)	
14.		2 years before charity?	you f	filed for bank	ruptcy, did you give any gifts or contribution	ons with a tot	al value of more tha	n \$600
	✓ No	s. Fill in the def	tails fo	or each gift or	contribution.			
P	art 6:	List Certa	in Lo	osses				
15.		1 year before y isaster, or gar			ıptcy or since you filed for bankruptcy, dic	l you lose any	thing because of th	eft, fire,
	☑ No □ Yes	s. Fill in the def	tails.					
Р	art 7:	List Certa	in Pa	ayments or	Transfers			
16.	anyone	you consulte	d abo	ut seeking ba	iptcy, did you or anyone else acting on yo nkruptcy or preparing a bankruptcy petitio	on?		-
	Include	any attorneys,	bankr	uptcy petition	preparers, or credit counseling agencies for s	services requir	ed for your bankrupto	cy.
	☐ No ✓ Yes	s. Fill in the det	tails.					
Wil	liam H. son Who W	Lively, Jr., P ./as Paid	. C.		Description and value of any property to	ransferred	Date payment or transfer was made	Amount of payment
432 Num		eet			_		06/22/2016	\$122.00
Tyl City	er		FX State	75702 ZIP Code	_			
Ema	ail or websit	te address			_			
Pers	son Who M	lade the Payment	, if Not	You	_			
Wil Pers	liam H. son Who W	Lively, Jr., P ./as Paid	. C.		Description and value of any property to	ransferred	Date payment or transfer was made	Amount of payment
		ner Ave.			_		05/22/2017	\$155.00
Num	nber Str	eet			_			
Tyl City	er		ГХ	75702	_			
City		_ 5	State	ZIP Code				
Ema	ail or websit	te address			_			
Pers	son Who M	lade the Payment	, if Not	You	_			

Deb	tor 1	Greg D Sorensen		Case number (if known)	
17.	anyone	-	vith your creditors or to make paym	on your behalf pay or transfer any proper ents to your creditors?	ty to
	✓ No ☐ Yes.	. Fill in the details.			
18.		-	uptcy, did you sell, trade, or otherw se of your business or financial affa	ise transfer any property to anyone, other airs?	than
		<u> </u>	s made as security (such as granting of ave already listed on this statement.	of a security interest or mortgage on your pro	perty).
	□ No ✓ Yes.	. Fill in the details.			
ind	ividual		Description and value of any property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Pers	on Who Re	eceived Transfer	2012 Polaris Sportsman 4 wheeler	\$3500.00	August 2016
Num	ber Stre	et	-		
City		State ZIP Code	-		
Pers	son's rela	tionship to you none	-		
19.		0 years before you filed for bank a beneficiary? (These are often		ty to a self-settled trust or similar device o	f which
	✓ No ☐ Yes.	Fill in the details.			
Pa	art 8:	List Certain Financial Acc	ounts, Instruments, Safe De	posit Boxes, and Storage Units	
20.	benefit, Include	closed, sold, moved, or transferr checking, savings, money market, o	ed?	r instruments held in your name, or for yo s of deposit; shares in banks, credit unions, b s.	
	✓ No ☐ Yes.	. Fill in the details.			
21.	-	now have, or did you have within ırities, cash, or other valuables?	1 year before you filed for bankrup	tcy, any safe deposit box or other deposit	ory
	✓ No ☐ Yes.	. Fill in the details.			

Debtor 1	otor 1 Greg D Sorensen Case number (if known)					
□N			age unit or place other than your home	within 1 year before you filed for bankr	uptcy?	
			Who else has or had access to it?	Describe the contents	Do you still have it?	
A&O Self Name of Sto			Kimberly Sorensen, spouse Name	misc. household items	□ No ☑ Yes	
	an Springs Dr. Street		Number Street			
Marshall City	TX State	75672 ZIP Code	City State ZIP Code	_		
Part 9:	Identify P	roperty Yοι	ı Hold or Control for Someone E	Else		
-	ld in trust for so		y that someone else owns? Include an	y property you borrowed from, are stor	ing for,	
	es. Fill in the det	ails.				
Part 10	Give Deta	ils About E	nvironmental Information			
For the pu	rpose of Part 10	, the following	g definitions apply:			
hazard	ous or toxic sub	stance, waste		oncerning pollution, contamination, rel rface water, groundwater, or other med es, wastes, or material.		
	-		property as defined under any environn utilize it, including disposal sites.	nental law, whether you now own, oper	ate, or	
			an environmental law defines as a haz ıtant, contaminant, or similar item.	ardous waste, hazardous substance, to	oxic	
Report all	notices, release	s, and procee	dings that you know about, regardless	of when they occurred.		
24. Has a law?	ny governmenta	al unit notified	you that you may be liable or potential	ly liable under or in violation of an envi	ironmental	
☑ N □ Y	o es. Fill in the det	ails.				
✓N		_	al unit of any release of hazardous mate	erial?		

Debtor	1	Greg D Sorensen				Case	number	(if known)						
	ave y ders.	ou been a party in any judic	ial or administra	tive	proceeding under any	enviro	nmental	law? Incli	ıde s	ettler	nents	and		
	_	s. Fill in the details.												
Part	11:	Give Details About Y	our Business	or	Connections to An	າy Bu	siness							
	ithin usine	4 years before you filed for ess?	bankruptcy, did	you	own a business or hav	e any	of the fo	llowing co	nect	ions	to an	у		
		A sole proprietor or self-emple A member of a limited liabiling A partner in a partnership An officer, director, or manal An owner of at least 5% of the self-emple An owner o	ty company (LLC) or l	imited liability partnershi orporation			or part-time						
	_	. None of the above applies.												
⊵ Pic N	-	s. Check all that apply above			re of the business	E		r Identifica				nber c	or ITIN	_
Busines						E	EIN: 2	6 - 2	9	4	0	0	2 0)
500 E. Number		vis reet		Name of accountant or bookkeeper			Dates business existed						_	
			Susan Care –	У					_	_				
Marsh City	nall	TX 75670 State ZIP Code	_			F	From	2004	_ 1	Го	pres	ent	_	
	I fina 7 No 7 Yes	s. Fill in the details below.		-	give a financial statem	ent to	anyone a	about your	busi	ness'	? Inc	lude		
that an proper	swer	the answers on this <i>Statem</i> rs are true and correct. I und r fraud in connection with a l U.S.C. §§ 152, 1341, 1519, a	derstand that ma	aking	a false statement, con	ncealin	g prope	rty, or obta	ining	mon	ey or			
		g D Sorensen Sorensen, Debtor 1	x	Sig	nature of Debtor 2									
Dat	e _	05/24/2017		Dat	e									
Did yo	u atta	ach additional pages to Yo <i>ur</i>	Statement of Fil	nanc	ial Affairs for Individua	als Fili	ng for Ba	ankruptcy (Offic	ial Fo	orm 1	07)?		
✓ No □ Ye)	, 0										,		
Did yo	u pay	or agree to pay someone w	ho is not an atto	orney	y to help you fill out ba	nkrupt	cy forms	s?						
☑ No		ame of person						ne <i>Bankrup</i>	•					e,
_							Declarat	ion, and Sig	gnatu	re (C)fficia	I Form	119).	

Fill in this inf	ormation to	identify your case	•	Check as directed in lines 17 and 21	:
Debtor 1 Debtor 2 (Spouse, if filing)	Greg First Name	D Middle Name Middle Name	Sorensen Last Name	According to the calculations required by this Statement: 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).	
, , , , ,		or the: EASTERN DIS		□ 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3). □ 3. The commitment period is 3 years. □ 4. The commitment period is 5 years.	
Official Form				Check if this is an amended filing	
		of Your Currer mmitment Peri	nt Monthly Income od	1	12/15
•		•		both are equally responsible for being line number to which the additional	

information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: **Calculate Your Average Monthly Income**

- What is your marital and filing status? Check one only.
 - Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

		Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2.	Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$0.00	\$0.00
3.	Alimony and maintenance payments. Do not include payments from a spouse.	\$0.00	\$0.00
4.	All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a	\$0.00	\$0.00

Net income from operating a business, profession, or farm

spouse. Do not include payments you listed on line 3.

	Debtor 1	Debtor 2			
Gross receipts (before all deductions)	\$18,476.31	\$0.00			
Ordinary and necessary operating -	\$19,630.33	\$0.00	•		
expenses			Сору		
Net monthly income from a business, profession, or farm	(\$1,154.02)	\$0.00	here →	(\$1,154.02)	\$0.00

Deb	tor 1	Greg D Sorensen				Case number (if kr	nown)	
						Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
6.	Net i	ncome from rental and other r	eal property					
			Debtor 1	Debtor 2				
		s receipts (before all ctions)	\$0.00	\$0.00				
	Ordir	nary and necessary operating	\$0.00	\$0.00				
		nonthly income from rental or real property	\$0.00	\$0.00	Copy here →	\$0.00	\$0.00	
7.		est, dividends, and royalties				\$0.00	\$0.00	
8.	Uner	nployment compensation				\$0.00	\$0.00	
		ot enter the amount if you conte fit under the Social Security Act						
	F	or you		\$0.0	00			
		or your spouse			00			
9.	Pens	sion or retirement income. Do a benefit under the Social Secu	not include any am			\$0.00	\$0.00	
11.	Total Calc	amounts from separate pages, ulate your total average montl lines 2 through 10 for each colu-	if any. nly income. mn.	В.	+	(\$1,154.02)	+ \$0.00	= (\$1,154.02) Total average monthly income
Pa	art 2:	Determine How to M	easure Your D	eductions fron	n Incom	е		
12.	Сору	your total average monthly in	ncome from line 1	1				(\$1,154.02)
13.	Calc	ulate the marital adjustment.	Check one:					
	You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below.							
		Total		+		\$0.00 Copy	here	\$0.00
1/	Your	current monthly income Sul	ntract the total in lin	ne 13 from line 12				(\$1,154.02)

Der	ו וסוס	<u> </u>	reg D Sorensen	Case number (if known)		
15.	Calc	ulate	your current monthly income for the year. F	Follow these steps:		
	15a.	Cop	by line 14 here 🔷		(\$1,154.02)	
		Mul	tiply line 15a by 12 (the number of months in a y	year).	X 12	
	15b.	The	result is your current monthly income for the ye	ear for this part of the form.	(\$13,848.24)	
16.	Calc	ulate	the median family income that applies to you	J. Follow these steps:		
	16a.	Fill	in the state in which you live.	Texas		
	16b.	Fill	in the number of people in your household.	2		
	16c.	To f	· · · · · · · · · · · · · · · · · · ·	size of household, go online using the link specified in the separate ilable at the bankruptcy clerk's office.	\$61,704.00	
17.	How	do th	ne lines compare?			
	17a.			the top of page 1 of this form, check box 1, <i>Disposable income is r</i> Do NOT fill out Calculation of Your Disposable Income (Official Form		
	17b.		·	page 1 of this form, check box 2, <i>Disposable income is determined</i> but Calculation of Your Disposable Income (Official Form 122C-thly income from line 14 above.		
Б	ort 2		Calculate Vary Commitment Baried I	Under 44 U.S.O. \$ 4225/b\/4\		
	art 3		Calculate Your Commitment Period L	onder 11 0.5.c. § 1325(b)(4)		
18.	Copy	opy your total average monthly income from line 11				
19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.						
	19a.	If th	e marital adjustment does not apply, fill in 0 on	line 19a –	\$0.00	
	19b.	Sub	otract line 19a from line 18.		(\$1,154.02)	
20.	Calc	ulate	your current monthly income for the year. F	Follow these steps:		
	20a.	Cop	oy line 19b		(\$1,154.02)	
		Mul	tiply by 12 (the number of months in a year).		X 12	
	20b.	The	result is your current monthly income for the ye	ear for this part of the form.	(\$13,848.24)	
	20c.	Cop	by the median family income for your state and s	size of household from line 16c.	\$61,704.00	
21.	How	do th	ne lines compare?			
	ك		20b is less than line 20c. Unless otherwise order box 3, <i>The commitment period is 3 years</i> . Go	ered by the court, on the top of page 1 of this form, to Part 4.		
			20b is more than or equal to line 20c. Unless ot s form, check box 4, <i>The commitment period is</i> s	therwise ordered by the court, on the top of page 1 5 years. Go to Part 4.		

Debtor 1	Greg D Sorensen	Case number (if known)
Part 4: Sign Below		
By sigr	ning here, under penalty of perjury I declare th	at the information on this statement and in any attachments is true and correct.
X /s/	Greg D Sorensen	X
Gre	eg D Sorensen, Debtor 1	Signature of Debtor 2
Dat	te_5/24/2017	Date
	MM / DD / YYYY	MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.